

Patent
Docket No. 3055/15

TO THE DIRECTOR OF PATENT AND TRADEMARK SERVICES
Box Applications
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith for filing is the patent application of under 37 CFR 1.53(b):
INVENTOR(S): Dr. Mohammad Ashraf GONDAL, Abdul HAMEED, Dr. Zain Hassan YAMANI

TITLE: LASER PHOTO-CATALYTIC PROCESS FOR THE PRODUCTION OF HYDROGEN

☐ This application is being filed without the declaration of the inventor(s). Inventor information is as follows:

☐ This is a continuing application of prior Application No. /
☐ Continuation
☐ Divisional
☐ Continuation-in-part

Enclosed are:

☒ Specification
☒ 4 Sheets of drawings
☒ Oath or Declaration signed by the inventor(s)
☒ Newly Executed
☐ Copy of Oath or Declaration from a Prior Application
☐ PLEASE DELETE the following inventor(s) named in the prior nonprovisional application:

☐ Certified copy of

☐ Convention priority is claimed
☐ English Translation Document

☒ An executed Assignment in favor of KING FAHD UNIVERSITY
OF PETROLEUM AND MINERALS

☒ Small entity status is claimed
☐ Preliminary Amendment
☒ Information Disclosure Statement

13281 U.S. PTO
041204

17531 U.S. PTO
10/821970

041204

The Filing Fee has been calculated as shown:

____ PLEASE ENTER PRELIMINARY AMENDMENT PRIOR TO CALCULATING FILING FEE

BASIC FEE			(Small Entity)		(Large Entity)	
			\$385		\$770	
Total Claims	24	- 20 = 4	x \$ 9 =	\$ 36	x \$ 18 =	
Indep. Claims	3	- 3 = 0	x \$ 43 =		x \$ 86 =	
Multiple Dependent Claims Presented			+ \$145 =		+ \$290 =	
TOTAL				\$421		

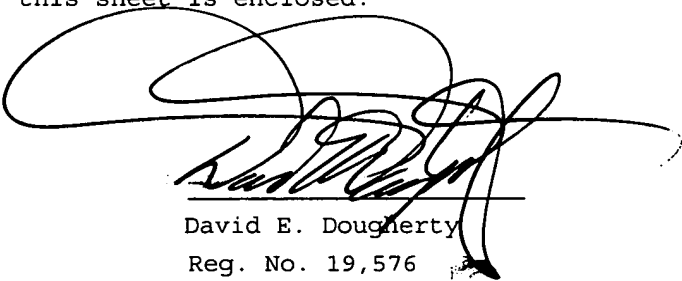
X Assignment Recordation Fee of \$40.00

____ Please charge Deposit Account _____ in the amount of \$ _____
(A duplicate copy of this sheet is enclosed)

X A payment of \$461.00 is made by credit card for the filing fee. A Credit Card Payment Form (PTO-2038) is attached hereto. The Commissioner is hereby authorized to charge payment of any additional filing fees required under 37 CFR 1.16 or any patent application processing fees under 37 CFR 1.17, or credit any over payment to the credit card account shown on the attached Credit Card Payment Form. Refund of all amounts overpaid, including those of twenty-five dollars or less, is specifically requested. Any fees not accepted by the credit card shown on the Form PTO-2038 may be charged to Deposit Account 04-0753.

X The Commissioner is hereby authorized to charge payment of any additional claims fees required under 37 CFR \$1.16 or processing fees under 37 CFR \$1.17, or credit any overpayment, to Deposit Account 04-0753. A duplicate copy of this sheet is enclosed.

Date: April 12, 2004


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